122412

IREDELL COUNTY HEALTH DEPARTMENT

STATESVILLE 704-878-5305 50.00 MOORESVILLE 704-664-5281

IMPROVEMENT PERMIT / AUTHORIZATION TO CONSTRUCT / OPERATION PERMIT / EXISTING SYSTEM INSPECTI

DATE 6/22/04

PERMIT# 101232 PIN# 4625 94 1684.829 4625-40-8120 PHONE: Business 704-895-9000 Home

OWNER OR CONTRACTOR DM Helms Const.

ADDRESS 18518 Statesville Rd. Cornelius, NC. 28031

LOCATION 1100 TR Lightship Dr. TL Swayne St. TR Thurston's Ct. on (L)

SUBDIVISION Point BLOCK / SECTION 8 LOT 829 LOT AREA 42,885 SITE CLASS PS DESIGN FLOW 480 L.T.A.R. .3

Septic Tank: 1500 Gallons; STB 338 Date 8-1-04

Pump Tank: 1000 Gallons; PT 477 Date 8-1-04

Pump Make: Goulds Model WED312M Serial No.

Nitrification Field: No Fields 1 Square Feet 1200 Linear Feet 400

No Lines 4@100 Trench Width 3 Max Trench Bottom Depth 3

☒ New System ☐ Repair System Type: I, II, III, IV, V, VI

System Description: PressMan - Type 3

Repair System Description: Pressured 16" PP3BRS

Maintenance Agreement Required: ☐ Yes ☒ No

☒ House/Mod. Home ☐ Mobile Home ☐ Business ☐ Other

No. Bedrooms 4 No. Bathrooms 4.5 No. Employees

☐ Slab ☐ Crawl Space ☒ Basement w/plumbing ☐ Basement wo/plumbing

Gravel Depth No

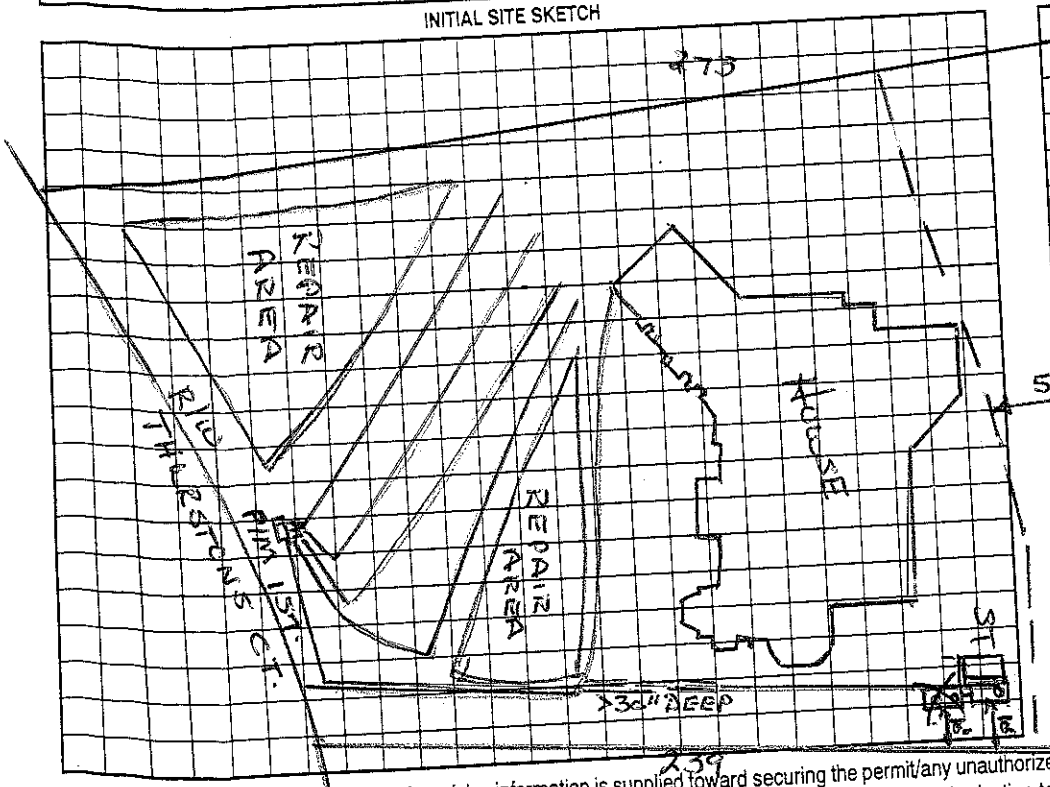
Water Supply: ☐ Individual ☐ Public ☒ Community C.L+T

Comments:/Conditions:

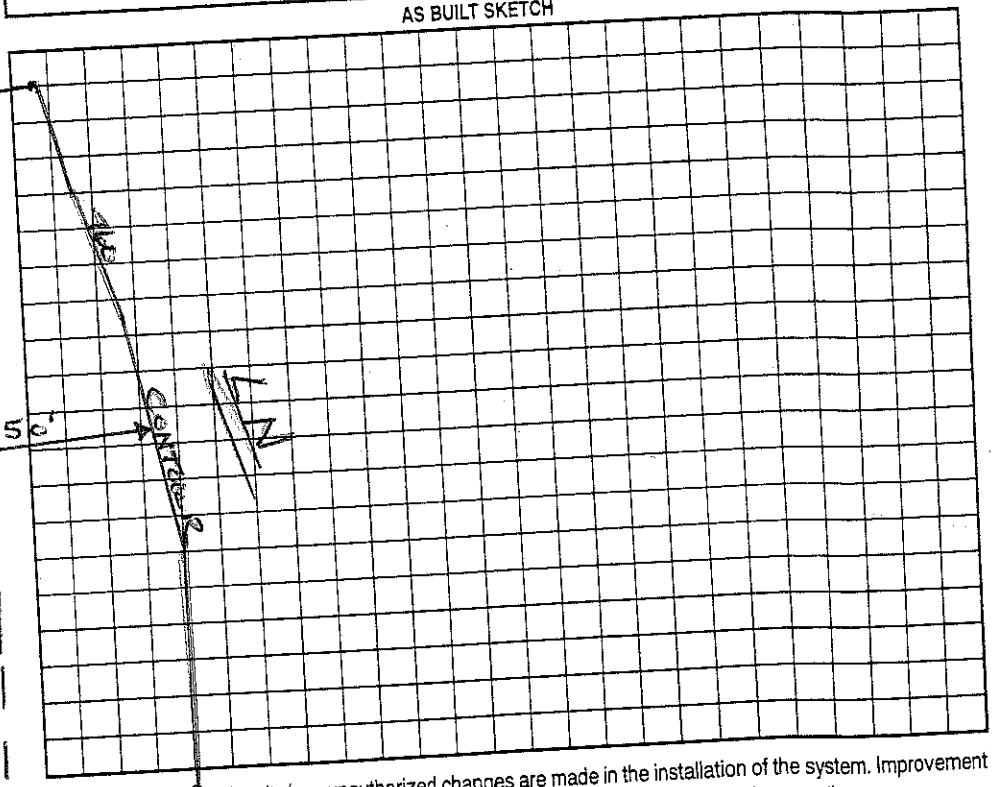
Comments:/Conditions: Checked tanks & lines 9/3/04

Pressure Checked 2/17/05

INITIAL SITE SKETCH



AS BUILT SKETCH



Permit can be suspended or revoked if any false information is supplied toward securing the permit/any unauthorized changes are made to the site/any unauthorized changes are made in the installation of the system. Improvement Permit with plat valid without expiration. Improvement Permit with site plan valid for sixty months. Authorization to Construct is valid for a period equal to that of Improvement Permit – not to exceed sixty months.

Signed: [signature] date 6-28-04 Installed by: R & H Dotson date 3-

Improvement Permit by: Wesley Sparks R.S. date 6/22/04 Operation Permit by: [signature] date

Authorization to Construct by: Wesley Sparks R.S. date 6/22/04 Existing System Inspection by:

HEALTH DEPT. COPY: WHITE OWNER COPY (FINAL): YELLOW OWNER COPY (INITIAL): PINK